	PLACE OF BIETH		
1 1	. County of ARIZON	NA STATE BOAL	RD OF HEALTH
I	District of AA/IVALYNAU I/M		12/
1 7		VITAL STATISTICS IFICATE OF BIRTH	
	OF OF	MINALE OF BIRIN	County Registrar No
9	City of	- AA - A	Local Registrar No.
2	Full name of child Taucises of the Annual Control of the Annual Co	hottical of dustitution, rife i	St. Ward ts NAME instead of street and number)
=		- OUNIX	If child is not yet named, make supplemental report, as directed.
] 3	Sex of Child To be answered ONLY 4. Twin, treater in event of plural	Legitimate?	
 	Male births. 5. Na., in order of		Date of birth 3 7 1925
8.		14.	Month Day Year
F	ull name	Full muiden name	A
-	muche Hondis	01	eta Jadella.
9.	Residence (Usual place of bode)	15. Residence (Usual place of abode	
	If nonresident give Marketsurau M	If nonresident, give place	Bar John Oki
10	. Color or race	16. Color or race	Total Miller Wy
	Mexicau 11. Age at last birthdex 10 (Years)	Maria	- 1
-	iii. Age at last birthday (Years)	- May Cau I	7. Age at last birthde (Years)
12.	. Birthplace (city or place)	18. Birthplace (city or place	2 7/4 (c) 7/4
	(State or country) Allofa // exilo	(State or country)	HOMEURE (IMA
13	. Occupation	19. Occupation	The state of the s
	Nature of industry	Nature of teactire	
20.	Number of children of this mother (a) Born alive and now	living 121. Were t	Precautions taken against oph-
(T	aken as of time of birth of child herein (b) Born alive but new d rtified and including this child.) (c) Stillborn Q	ead the imin	neonatorum?
	CERTIFICATE OF ATTENDI	MC Dilyolous of a	Au -
1	merely terrify that I attended the birth of this child, who was "	LOUIS TO STATE AND STATE OF THE	MA2-6. on the date above stated
ره ا	*When there was no attending physician r midwife, then the father, householder, Signature	on alive or solborn.)	The mile above stated.
	hild is one that neither breathes nor shows?		Physician (Control of the Control of
U "	iner evidence of life after birth. Address	Wmselman	aryona
uirer 3 su	n name added from pplemental report	Jun 1 1,026 (1914.11
ļ	Month, day, year.		Local Registrar.
1	Registrat,	19	County Registrar.

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